

Libin Cardiovascular Institute Test Your Concept Request Form

Date:

Faculty Member:

Project title:

Please list the funding agencies, peer review panels, and competition dates to which you will submit a grant application:

Does you project take into account any of the following:

- $\hfill\square$ sex and gender considerations
- □ Patient oriented Research
- □ Knowledge translation

Please list any collaborators on your project.

Please identify any Faculty members that you would like to be present for your review session.

Please submit your completed form to Judy Siu, Libin Institute Research Officer, at <u>libin@ucalgary.ca</u>.